October 24, 2017

Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD * 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

| Gift or Bequest information received by a department or accepted by the Governor on behalf of the state |
|---|
| For office use only Indexed |
| Audited |
| Checked |
| Computer |
| |

FORM-GB

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

ristin Hagedon

STATE TRAINING SCHOOL

| Name of Department or Office 3211 EDGINGTON AVENUE E | ELDORA, 1A 50627 | |
|--|--|--|
| Mailing Address (641-858-5402 | City, State, Zip Code | |
| Area Code & Telephone No. | | |
| ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI | ICE; | |
| Kristin Hagedon | | |
| Name - same | | |
| Malling Address (if different from above) khagedo@dhs.state.ia.us | City, State, Zip (if different from above) | |
| Email Address | Area Code & Telephone Number (if different from above) | |
| ONOR OF GIFT OR BEQUEST: | | |
| Mary Jo Prieden | | |
| Vame | | |
| PO Box 93 Winterset, IA 50273 | | |
| Mailing Address City, State, Zip Code | 10/18/17 \$1,000.00 | |
| | Date of Gift or Bequest Amount/Value* | |
| Area Code & Telephone Number | *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00". | |
| Email Address (optional) | | |
| Provide a description of the gift or bequest and purpose thereof: | | |
| | | |
| monetary donation to be used toward student activiti | es in the State Training School's Cottage 8 Rec Hall | |
| Critoria to use this form: | | |
| Receipt of any gift or bequest that is received by any department of the | state or received by the Covernor on behalf of the state | |
| | State of received by the Governor off perials of the State. | |
| atement of Affirmation: | | |
| Kristin Hagedon affirm that the gift or beguest reported above | ve is accurate. I further affirm that the information concerning the donor and | |